

# COUNTY OF LOS ANGELES TREASURER AND TAX COLLECTOR



KENNETH HAHN HALL OF ADMINISTRATION 500 WEST TEMPLE STREET, ROOM 437 P. O BOX 514917 LOS ANGELES, CALIFORNIA 90051-4917

MARK J. SALADINO
TREASURER AND TAX COLLECTOR

January 9, 2003

Telephone (213) 974-2101 Telecopier (213) 626-1812

The Honorable Board of Supervisors County of Los Angeles 383 Kenneth Hahn Hall of Administration 500 West Temple Street Los Angeles, CA 90012

**Dear Supervisors:** 

# REQUEST TO ACCEPT COMPROMISE OFFER OF SETTLEMENT (ALL DISTRICTS AFFECTED - 3 VOTES)

#### T IS RECOMMENDED THAT YOUR BOARD:

Pursuant to Section 1473 of the Health and Safety Code, authorize acceptance of the compromise offers of settlement from the following individuals who were injured in a third party compensatory accident and who received medical care at a County facility:

Felix Vasquez, in amount of \$8,276.67 Jesus Hernandez, in amount of \$4,951.67 Dony Morales, in amount of \$4,361.92 Esther F. Becerra, in amount of \$1,594.40 Randy Romero, in amount of \$18,609.66 Dawn L. Gant, in amount of \$4,959

#### JUSTIFICATION:

The best interest of the County would be served by the approval of this recommendation and the County Counsel concurs.

The Honorable Board of Supervisors January 9, 2003 Page 2

#### **PURPOSE OF RECOMMENDED ACTION:**

The compromise offers of settlement are recommended because the patients, estates, or legally responsible relatives are unable to pay the charges.

#### Implementation of Strategic Plan Goals:

This action is consistent with the Countywide Strategic Plan Goal of Fiscal Responsibility in pursuing collection of charges owed for County services.

#### FISCAL IMPACT:

The County will recover partial payment from a third party against debts, otherwise uncollectible due to the limited financial resources of the individuals who received the medical care.

Respectfully submitted,

MarchSold

MARK J. SALADINO

Treasurer and Tax Collector

MJS:DA:tr e:Comp.51

**Attachments** 

c: Chief Administrative Officer

**County Counsel** 

APPROVED
LLOYD W. PELLMAN
County Council

County Counsel

COUNTY OF LOS ANGELES
TREASURER AND TAX COLLECTOR

TRANSMITTAL NO. 51A DATE: January 9, 2003

Amount of Aid	\$252,912.00	Account Number	10648056
Amount Paid	.00	Name	Vasquez, Felix
		Service	
Balance Due	252,912.00	Date	01/25/02 to 05/13/02
Compromise			
Amount Offered	8,276.67	Facility	LAC USC Medical Center
Amount to be		Service	
Written Off	\$244,635.33	Туре	Inpatient/Outpatient

#### **JUSTIFICATION**

Mr. Vasquez was hit by an automobile while crossing the street. He was treated at LAC USC Medical Center at a cost of \$252,912.00. There is no Medi-Cal or private insurance involvement.

The attorney has settled the case for the amount of \$25,000.00 and proposes the following disbursement:

Disbursements	Total Claim	Proposed Settlement	Percent of Settlement
Attorney Fees	\$ 8,333.33	\$ 8,276.66	33.10%
Attorney Cost	170.00	170.00	0.68%
County of Los Angeles	252,912.00	8,276.67	33.11%
Net to Client	N/A	8,276.67	33.11%
Total	\$261,415.33	\$25,000.00	100.00%

Our financial investigation reveals that Mr. Vasquez is unemployed and homeless. He has no other source of income or tangible assets.

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TRANSMITTAL NO. 51B DATE: January 9, 2003

Amount of Aid	\$98,870.00	Account Number	10654346
Amount Paid	0.00	Name	Hernandez, Jesus
		Service	
Balance Due	98,870.00	Date	09/28/01 to 07/08/02
Compromise			
Amount Offered	4,951.67	Facility	LAC USC Medical Center
Amount to be		Service	
Written Off	\$93,918.33	Туре	Inpatient/Outpatient

#### **JUSTIFICATION**

Mr. Hernandez was involved in an automobile versus automobile accident. He was treated at LAC USC Medical Center at a cost of \$98,870.00. There is no Medi-Cal or private insurance involvement.

The attorney has settled the case for the amount of \$15,000.00 and proposes the following disbursement:

Disbursements	Total Claim	Proposed Settlement	Percent of Settlement
Attorney Fees	\$ 4,951.66	\$ 4,951.66	33.02%
Attorney Cost	145.00	145.00	0.94%
County of Los Angeles	98,870.00	4,951.67	33.02%
Net to Client	N/A	4,951.67	33.02%
Total	\$103,966.66	\$15,000.00	100.00%

Our financial investigation reveals that Mr. Hernandez is unemployed and receives support from SSI. He has no other source of income or tangible assets.

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TRANSMITTAL NO. 51C DATE: January 9, 2003

		Account	
Amount of Aid	\$129,224.00	Number	10550999
Amount Paid	.00	Name	Morales, Dony
		Service	
Balance Due	129,224.00	Date	08/17/00 to 02/23/01
Compromise			
Amount Offered	4,361.92	Facility	LAC USC Medical Center
Amount to be		Service	
Written Off	\$124,862.08	Туре	Inpatient/Outpatient

#### **JUSTIFICATION**

Mr. Morales was involved in an automobile versus automobile accident. He was treated at LAC USC Medical Center at a cost of \$129,224.00. There is no Medi-Cal or private insurance involvement.

The attorney has settled the case for the amount of \$15,000.00 and proposes the following disbursement:

Disbursements Total Claim		Proposed Settlement	Percent of Settlement
Attorney Fees	\$ 5,000.00	\$ 5,000.00	33.33%
Attorney Cost	1,157.00	1,157.00	7.71%
Ludvik Artinyan, M.D.	4,605.00	0.00	0.00%
Isaac Reger, M.D.	990.00	0.00	0.00%
Sim C. Hoffman, M.D.	1,760.00	0.00	0.00%
Bob's Rexall Drugs	122.35	0.00	0.00%
County of Los Angeles	129,224.00	4,361.92	29.08%
Net to Client	N/A	4,481.08	29.88%
Total	\$142,858.35	\$15,000.00	100.00%

Our financial investigation reveals that Mr. Morales supports himself and family of two with a marginal income. He has no other source of income or tangible assets.

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TRANSMITTAL NO. 51D DATE: January 9, 2003

Amount to be Written Off	\$42,694.60	Service Type	Inpatient
Compromise Amount Offered	1,594.40	Facility	High Desert Medical Ctr.
Balance Due	44,289.00	Service Date	05/31/00 to 06/07/00
Amount Paid	.00.	Name	Becerra, Esther F.
Amount of Aid	\$44,289.00	Account Number	10485618

#### **JUSTIFICATION**

Ms. Becerra was involved in an automobile versus automobile accident. She was treated at High Desert Medical Center at a cost of \$44,289.00. There is no Medi-Cal or private insurance involvement.

The attorney has settled the case for the amount of \$10,000.00 and proposes the following disbursement:

		Proposed	Percent of
Disbursements	Total Claim	Settlement	Settlement
Attorney Fees	\$ 3,333.33	\$ 3,333.33	33.33%
Attorney Cost	879.29	879.29	8.80%
Good Samaritan Hospital	39,095.84	1,407.45	14.08%
Good Samaritan Rad. Med. Group	2,708.00	97.49	0.98%
The Kay Medical Group	1,050.00	37.80	0.38%
California Lung Association	900.00	32.40	0.32%
Pacific Cardiology Consultants	110.00	3.96	0.03%
Los Angeles City Fire Department	377.00	13.57	0.13%
Douglas F. Smiley, M.D.	480.00	17.28	0.17%
Emergency Phys. Med. Group	1,536.00	55.30	0.55%
Fagan Emergency Medical Group	1,692.00	60.88	0.61%
Central City Pathology Med. Grp.	360.00	12.80	0.12%
County of Los Angeles	44,289.00	1,594.40	15.95%
Net to Client	N/A	2,454.05	24.55%
Total	\$96,810.46	\$10,000.00	100.00%

Our financial investigation reveals that Ms. Becerra is unemployed and receives support from General Relief. She has no other source of income or tangible assets.

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TRANSMITTAL NO. 51E DATE: January 9, 2003

		Account	
Amount of Aid	\$62,591.00	Number	10559919
Amount Paid	.00	Name	Romero, Randy
		Service	
Balance Due	62,591.00	Date	07/25/00 to 12/04/00
Compromise			07720700 to 12704700
Amount Offered	18,609.66	Facility	LAC USC Medical Center
Amount to be		Service	Coomodical Center
Written Off	\$43,981.34	Туре	Inpatient/Outpatient

#### **JUSTIFICATION**

Mr. Romero was involved in an automobile versus MTA bus accident. He was treated at LAC USC Medical Center at a cost of \$62,591.00. There is no Medi-Cal or private insurance involvement.

The attorney has settled the case for the amount of \$60,000.00 and proposes the following disbursement:

Disbursements	Total Claim	Proposed Settlement	Percent of Settlement
Attorney Fees	\$26,505.00	\$26,505.00	44.18%
Attorney Cost	3,641.26	3,641.26	6.07%
Ambulance	598.75	598.75	1.02%
County of Los Angeles	62,591.00	18,609.66	31.04%
Net to Client	N/A	10,645.33	17.69%
Total	\$93,336.01	\$60,000.00	100.00%

Our financial investigation reveals that Mr. Romero is unemployed and receives support from his aunt. He has no other source of income or tangible assets.

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TRANSMITTAL NO. 51F DATE: January 9, 2003

Amount of Aid	\$389,912.00	Account Number	10633815
Amount Paid	.00	Name	Gant, Dawn L.
Balance Due	389,912.00	Service Date	02/15/02 to 10/24/02
Compromise Amount Offered	4,959.00	Facility	LAC USC Medical Center
Amount to be Written Off	\$384,953.00	Service Type	Inpatient/Outpatient

#### **JUSTIFICATION**

Ms. Gant was involved in an automobile versus pedestrian accident. She was treated at LAC USC Medical Center at a cost of \$389,912.00. There is no Medi-Cal or private insurance involvement.

The attorney has settled the case for the amount of \$15,000.00 and proposes the following disbursement:

Disbursements	Total Claim	Proposed Settlement	Percent of Settlement
Attorney Fees	\$ 5,000.00	\$ 4,959.00	33.06%
Attorney Cost	123.00	123.00	0.82%
County of Los Angeles	389,912.00	4,959.00	33.06%
Net to Client	N/A	4,959.00	33.06%
Total	\$395,035.00	\$15,000.00	100.00%

Our financial investigation reveals that Ms. Gant supports herself with General Relief. She has no other source of income or tangible assets.